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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/676,685	
	Filing Date	September 30, 2003	
	First Named Inventor	Eli Avihod	
	Art Unit	3636	
	Examiner Name	Joseph F. Edell	
Total Number of Pages in This Submission	4	Attorney Docket Number	MEDIS-65233

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <b>Response to Election/Restriction Requirement Postcard</b>
Remarks		
Deposit Account No. 24,201		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	FULWIDER PATTON LLP		
Signature			
Printed name	PAUL D. O'BRIEN		
Date	NOVEMBER 28, 2005	Reg. No.	42,949

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the			
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Typed or printed name	PAUL D. O'BRIEN	Date	NOVEMBER 28, 2005

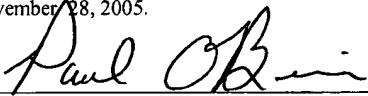
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Paul D. O'Brien, Reg. No. 42,949

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re the application of

Inventor: Eli Avihod

Serial No.: 10/676,685

Filed: September 30, 2003

For: WHEELCHAIR WITH BOOK-STYLE  
FOLDING FEATURE

Examiner: Joseph F. Edell

Group Art Unit: 3636

Client ID/Matter No. MEDIS-65233

Mailed: November 28, 2005

**RESPONSE TO ELECTION/RESTRICTION REQUIREMENT**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

This Response to Election/Restriction Requirement is submitted in response to the Office Action dated October 27, 2005. Applicant gratefully acknowledges the telephone call made on October 24, 2005 requesting an oral election. Applicant has chosen to respond in written form.

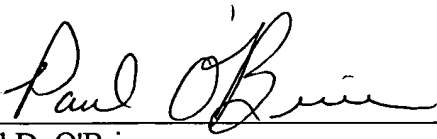
**Election**

Applicant elects Species I, relating to Figures 2-5 for prosecution on the merits. Species I includes generic Claim 1 as identified by the Examiner and Claims 2-11 and 14.

Applicant believes each of the selected claims is in condition for allowance and requests early examination and allowance of each.

Respectfully submitted,

FULWIDER PATTON LLP

By:   
Paul D. O'Brien  
Reg. No.: 42,949

PDO/mmw

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